

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET

SERIAL NO

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1						
2		1				
3		1				
4		3				
5		3				
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50						
TOTAL IND.	1					
TOTAL DEP.		127				
TOTAL CLAIMS		128				

	IND	DEP	IND	DEP	IND	DEP
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